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URBAN DISTRICT COUNCIL
OF WOKING

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Annual
REPORT

of the

MEDICAL OFFICER OF HEALTH

together with the Report of the

CHIEF PUBLIC HEALTH INSPECTOR

for the year

1957



URBAN DISTRICT COUNCIL OF WOKING

PUBLIC HEALTH AND DRAINAGE COMMITTEE, 1957-1958

Chairman:

COUNCILLOR MRS. D. E. GALE

Vice-Chairman:

COUNCILLOR J. A. TERRY, M.A.

The Chairman of the Council:

COUNCILLOR F. E. SOWDEN, J.P.

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CLR. A. D. CAMPBELL,	CLR. J. W. JONES
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CLR. L. W. CHEESEMAM,	CLR. MRS. R. F. MCGAW
(elected 19.10.57)	CLR. MRS. M. E. RICHARDSON
CLR. S. G. HIGGINS	CLR. E. J. SMITH
CLR. MRS. D. STINCHCOMBE (retired 17.9.57)	

PUBLIC HEALTH DEPARTMENT

Medical Officer of Health:

C. A. MCPHERSON, M.B., CH.B., D.P.H., L.D.S., D.P.D.

Chief Public Health Inspector and Cleansing Officer:

A. G. DAVIES, A.M.INST.P.C., M.A.P.H.I.

Deputy Chief Public Health Inspector:

A. BARNETT, M.A.P.H.I.

Public Health Inspectors:

H. W. MONKS	J. S. GARFORTH
P. G. H. SMITH	M. JACOB (commenced 8.7.57)

(All qualified and Members of The Association of Public Health Inspectors)

Clerical Staff:

MISS M. COTTINGHAM (Chief Clerk)	
MISS J. A. THOMPSON	MRS. J. J. DEVONSHIRE
MISS M. J. PULLEN (commenced 11.2.57)	

To the Chairman and Members of the Public Health Committee

MADAM CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report on the health of the district for the year 1957.

From the vital statistics we see a substantial increase in the population, especially by newcomers to the district, and in less degree a natural increase in the population caused mainly by a rising birth rate. There were again no deaths due to maternity. In infectious diseases, despite many cases of measles, there were no deaths, but the increased incidence of whooping cough was responsible for two fatalities in children aged 2 months and 21 months, neither of whom had been vaccinated against this disease.

There were three cases only of poliomyelitis of the paralytic type in adults, with one fatal case due to acute and early respiratory failure. In two of these instances it appeared probable that the disease was contracted abroad. With the help of the Public Health Laboratory Service at Guildford we were again able to establish the type of these infections and confirm our knowledge that other members of a family are invariably infectious when one clinical case makes its appearance. This, of course, is the state of affairs with the disease dysentery which again, but in less degree than last year, disrupted the schooling of some 30 children mainly in the infants age group in one school. In these two infections, therefore, it is most essential to know when any occupational factor, especially food hygiene, comes into the picture, and the only way to determine this is to obtain early information of suspected cases.

In October–November, in common with the rest of the country, a marked rise in influenza was seen which by its symptoms and the advance publicity which it received was probably of the Asiatic type. Laboratory aids, which are of course inevitably delayed, were able to confirm the diagnoses in two cases only from the few investigations which were undertaken. In a period of approximately a month we were advised by the Ministry of National Insurance that some 1,700 cases of sickness in adults were attributable to this complaint. Whilst there was some slight increase in the conditions notifiable under the categories of acute influenzal or acute primary pneumonia during this period, this was not significant, nor were the deaths, except as one would expect to find their especial relationship to the elderly.

As to the preventable diseases, it is gratifying to note the increasing use of the triple antigen by private practitioners. This means that by the same number of injections one can ensure a substantial measure of active immunity in a child against diphtheria, whooping cough and tetanus. One would like to see these injections commenced at an earlier age than one year, and although unfortunately there are some limitations imposed on their use during the middle quarters of the year when

poliomyelitis can be expected, with increasing vaccination against this infection one may anticipate this precautionary restriction to disappear. It is noteworthy that now no alum containing vaccines are provided by the Health Services owing to the significant association which has been shown by the Medical Research Council to exist between the injections themselves and paralytic poliomyelitis in a relatively small number of cases in the country generally. After a rather low acceptance rate of approximately 35 per cent only in Woking after registration in the early part of the year for poliomyelitis vaccination, the figure has now shown a marked rise and is probably nearer one of 60 per cent. Some 1,766 children were vaccinated in the Woking clinics and by the general practitioners during the year, and by the 31st December it became possible for parents to register children between the ages of 6 months and 15 years. It is again surprising that only about one half of parents of children aged 13–14 years accept skin tests and vaccination against tuberculosis, a provision which has now been extended to independent schools. However, with the many artificial aids which now exist to stimulate the body's immunity, and however effective and desirable they may be in the prevention of disease, it is perhaps desirable that any methods of propaganda should be applied with some discretion although continuously through the medium of health and general educational channels to children and parents alike. In the fortunate absence of the morbidities and mortalities which were seen in many of their predecessors, it is understandable that people tend to lose their respect for illnesses which lend themselves to prevention, and it is through the medium of the health visitors, the general practitioners and the head teachers that the reasons for immunisation and vaccination against disease are most likely to become acceptable to the general public, and by the results, not always easy of interpretation, which they achieve. It is perhaps necessary to point with some certainty to the number of people who now visit the Mediterranean coast, especially in the summer, and are affected with gastro-intestinal upsets. Some of these are indeed cases of typhoid fever and it is fortuitous that there are not many more as the spread of dysenteries and enteric fevers is very similar. In this respect the need for stressing the value of T.A.B. vaccinations for those considering foreign travel must be emphasised.

I would wish to comment on an industrial hazard associated with the use of oil-fired boiler installations, some cases of which were brought to my notice by the awareness of the private medical practitioner concerned. Three or four men had been complaining of symptoms in varying degree coming on immediately or several hours after they had been engaged in boiler-cleaning operations. This was evidenced by conjunctivitis, sore throat, and a discomfort of the chest and some bronchitis and occasional loss of energy. In due course, after investigations in the near-by factory concerned, it transpired that in all

probability their symptoms were due to the toxic action of vanadium pentoxide. The substance vanadium is a normal constituent in variable degree in fuel oils and after combustion is present as an irritant soot on heat exchange pipes and fire brick walls. It is therefore during boiler cleaning operations that this constitutes a risk to employees, and on this particular occasion was recoverable in significant quantities from the ash and in the atmosphere of the boiler-house in question. The incident and from what is now known of vanadium poisoning is of importance, as with the gradually increased popularity of oil-fired plants the risk of exposure to those concerned must be reduced to a minimum. This may be done by advising the use of adequate face masks and protective clothing, by vacuum cleaning and by adequate ventilation of the boiler-house.

A very different type of problem with which the public health department was engaged during the greater part of the summer and autumn months was the nuisance of mosquitoes. In the main our efforts were directed towards the identification of as many specimens as possible and particularly from those areas where complaints of bites were experienced. In lesser degree we were also conscious that species of the anopheline mosquitoes capable of conveying malaria under appropriate conditions existed. With the customary helpful assistance of the London School of Hygiene and Tropical Medicine and the British Museum (Natural History), some 880 specimens were identified, and in order of prevalence the following species were recognised as being mainly responsible as a nuisance because of their biting habits: *Theobaldia Annulata*, *Aedes Punctor*, *Aedes Caspius*, *Aedes Cantans*, and *Anopheles Claviger*. With some knowledge, therefore, of the majority of the species concerned, it was possible to formulate measures of control applicable to the district concerned, and especially bearing in mind the limited resources of the staff available. Of its very nature, Woking, with large areas of poorly drained common land, its water courses, its heathers and pines and its degree of cesspool drainage, constitutes an area most resistant to the reduction of mosquito breeding. It was hoped, however, towards the end of the year to be able to recommend certain mechanical measures and appropriate insecticides for suitably timed applications during the earlier part of 1958 which would be directed largely towards known and potential breeding grounds during the larval stage in the life cycle of the mosquito.

In April, Woking Victoria Hospital's new out-patient department was opened by the Minister of Health and added provision in a modern three-storey building was made for most forms of out-patient treatment, including improved facilities for X-ray diagnosis.

I would especially wish to record the energies of the Chief Public Health Inspector and his staff in dealing not only with their routine public health work but in finding the time, only too frequently their spare time, to devote themselves to what must at this stage be con-

sidered essentially entomological research. In this respect I would especially wish to commend the enthusiasm and energy of Mr. P. G. H. Smith.

I would also like to add my appreciation of the co-operation which I have received from the general practitioners, and in conclusion to convey my thanks to you, Madam Chairman and Members, to the Clerk and all Chief Officers, for their assistance to me during the year.

I have the honour to be, Ladies and Gentlemen,

Your obedient servant,

C. A. McPHERSON,

Medical Officer of Health.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area (acres), 15,712.

Estimate of Resident Population, Mid-year 1957, 59,270.

Year	Houses	Population	Average No. per House
1911	4,072	24,808	6·0
1921	5,078	26,430	5·8
1931	6,853	29,950	4·4
1941	10,743	47,770	4·4
1951	11,949	49,310	4·1

Number of inhabited houses (end of 1957) according to rate books, 16,149.

Rateable Value, £869,287.

Sum represented by a penny rate, £3,691.

Social Conditions

Woking is a residential town situated within 25 miles of London and consequently a substantial number of the residents find employment in London.

A total of 1,947 acres comprises common and open spaces and there are many recreation grounds to provide open air facilities for the children and adults. In the 34-acre Woking Park there is in addition to normal activities an open-air swimming pool.

During the year 6,094 persons took advantage of the available facilities at the slipper baths.

Unemployment amongst Woking residents was rather higher than the average figure for the post-war years as is shown by the figures below indicating the numbers of unemployed persons on the dates given.

Classification	Dec. 31st 1953	Dec. 31st 1954	Dec. 31st 1955	Dec. 31st 1956	Dec. 31st 1957
Male Adults ..	78	70	48	88	109
Male Juveniles ..	34	9	7	4	10
Female Adults ..	73	52	42	43	80
Female Juveniles ..	42	6	7	4	6
Totals	227	137	104	139	205

Vital Statistics

	1957	1956
(1) Number of live births	1,008	931
(2) Birth Rate (per 1,000 population)	17·01	16·41
(3) Birth Rate (corrected by Registrar General's comparability factor)	16·84	16·25
(4) Number of still-births per 1,000 total births..	24·2	20·00
(5) Number of deaths	775	790
(6) Death Rate (per 1,000 population)	13·08	13·92
(7) Death Rate (corrected by Registrar General's comparability factor)	9·94	10·02
(8) Natural increase of population	233	141
(9) Number of deaths of infants under one year	31	30
(10) Infant Mortality Rate per 1,000 live births ..	30·75	32·22
(11) Number of women dying in or in consequence of childbirth	—	—

Extracts from Vital Statistics for the Year 1957

Live Births:—	Total	M.	F.
Legitimate	955	502	453
Illegitimate	53	26	27
Birth Rate, 17·01 per 1,000 population			
Adjusted Birth Rate, 16·84 per 1,000 population			
Still-births	25	10	15
Rate per 1,000 total births, 24·2			
Deaths	775	370	405
Death Rate, 13·08 per 1,000 population			
Adjusted Death Rate, 9·94 per 1,000 population			

The crude birth and death rates for Woking are strictly not comparable with the figure for England and Wales. In order to arrive at comparative figures and make allowance for the way in which the sex and age distribution of the local population differs from that for England and Wales the Registrar General has introduced comparability factors. These figures for Woking are 0·99 and 0·76 for births and deaths respectively, and the adjusted rates have been calculated accordingly.

Deaths from puerperal causes:—

Rate per 1,000 total
(live and still) births

Pregnancy, childbirth, abortion.. .. .	—
Death rate of infants under one year of age:—	
All infants per 1,000 live births	30·75
Legitimate infants per 1,000 legitimate live births ..	30·37
Illegitimate infants per 1,000 illegitimate live births ..	37·74
Deaths from malignant neoplasms (all ages)	112
Deaths from measles (all ages)	—
Deaths from whooping cough (all ages)	2
Deaths from diarrhoea (under 2 years of age)	—

Births

The following table shows the number of live births and the birth rate over the past 5 years.

Year	Number of Births	Birth Rate*	Birth Rate for England and Wales
1953	747	14·29	15·5
1954	820	15·33	15·2
1955	881	15·91	15·0
1956	931	16·25	15·7
1957	1,008	16·84	16·1

* Corrected by the Registrar General's comparability factor.

It is of interest to note that the actual number of births which occurred in the Woking U.D. during 1957 was 1,699, although only 1,008 were credited to Woking. The remainder (being born to women not normally resident in Woking) were transferred to other Districts.

The births have exceeded the deaths for the past 13 years, the natural increment for this year being 233.

The statistics supplied by the Registrar General during 1957 show that the total number of registered live births allocated to Woking was 1,008—528 males and 480 females, the birth rate being 17·01 per 1,000 of the population. Of the total number of births 955 were legitimate and 53 (5·26 per cent) illegitimate.

In addition there were 25 still births, 10 male and 15 female.

Causes of Death during 1957

	Male	Female
All causes	370	405
Tuberculosis, respiratory	3	1
Tuberculosis, other	—	—
Syphilitic disease	4	1
Whooping cough	—	2
Diphtheria	—	—
Meningococcal infections	—	—
Acute poliomyelitis	1	—
Measles	—	—
Other infective and parasitic diseases	1	1
Malignant neoplasm, stomach	4	2
Malignant neoplasm, lung, bronchus	26	3
Malignant neoplasm, breast	—	9
Malignant neoplasm, uterus	—	2
Other malignant and lymphatic neoplasms	42	24
Leukaemia, aleukaemia	—	—
Diabetes	2	3
Vascular lesions of nervous system	41	51
Coronary disease, angina	58	56
Hypertension with heart disease	7	29

Causes of Death during 1957—*contd.*

	Male	Female
Other heart disease	67	124
Other circulatory diseases	15	17
Influenza	2	2
Pneumonia	14	16
Bronchitis	14	10
Other diseases of respiratory system	4	4
Ulcer of stomach and duodenum	6	2
Gastritis, enteritis and diarrhoea	1	2
Nephritis and nephrosis	1	4
Hyperplasia of prostate	3	—
Pregnancy, childbirth, abortion	—	—
Congenital malformations	7	4
Other defined and ill-defined diseases	30	27
Motor vehicle accidents	5	1
All other accidents	9	7
Suicide	3	1
Homicide and Operations of War	—	—

Deaths

The total number of deaths registered in the district was 775—370 males and 405 females, equal to a death rate of 13·08 per thousand of the estimated population, or an adjusted rate of 9·94.

The deaths occurring outside the district of people really belonging to Woking were 167.

The following deaths occurred in Institutions outside the Woking district of people usually resident in Woking:—

St. Luke's Hospital, Guildford	9
St. Peter's Hospital, Chertsey	88
London Hospitals	19
Other Hospitals and Institutions	29

There were 83 deaths within this district of persons not usually resident in Woking, 38 males and 45 females.

The principal causes of death, excluding those from zymotic diseases, are:—

Malignant neoplasms	112
Heart disease	341
Vascular lesions of nervous system	92
Other circulatory diseases	32
Pneumonia	30
Bronchitis	24
Other respiratory diseases	8

Malignant Neoplasms

Malignant and lymphatic neoplasms were responsible for 112 deaths or 14·45 per cent of total deaths.

Diseases of the Heart and Circulation

There were 465 deaths due to diseases of the heart and circulation. This figure represents 60 per cent of the whole deaths.

Bronchitis, Pneumonia, and other Respiratory Diseases

There were 30 deaths due to Pneumonia, 24 to Bronchitis, and 8 to other respiratory diseases. This gives a total of 62 or 8 per cent of total deaths.

The following table sets out the death rates per thousand of the population for certain diseases:—

Bronchitis	..	..	..	..	..	0·40
Cancer	..	..	..	..	..	1·89
Heart Disease	..	..	..	..	..	5·75
Heart Disease and Circulation	..	..	..	..	..	7·85
Nephritis and Nephrosis	..	..	..	..	..	0·08
Gastritis, Enteritis and Diarrhoea	..	..	..	..	..	0·05
Typhoid and Para-typhoid	..	..	..	..	..	—
Pneumonia	..	..	..	..	..	0·51
Influenza	..	..	..	..	..	0·07
Tuberculosis	..	..	..	..	..	0·07

Deaths due to Violence

The figures given below indicate the manner in which Woking residents met their deaths from violence.

Road Traffic deaths	..	6	Drowning	..	..	2
Falls	4	Explosion	2
Poisoning	3	Suffocation	1
Burns and Scalds	..	2	Crushing	..	..	1
Rail Traffic	..	..	1			

In addition to the above there were 4 suicides.

Infantile Mortality

There were 31 infant deaths during the year (including transferable deaths) giving an Infant Mortality rate of 30·75 per 1,000 live births, compared with 23·0 per 1,000 live births for England and Wales. The Infantile Death rate for illegitimate children in Woking was 37·74 per 1,000 illegitimate live births.

The following tables show the causes of death and ages at death of infants under 1 year.

Cause of Death	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total No. under 1 month
Prematurity	3	—	—	—	3
Hydrocephalus ..	2	—	—	—	2
Atelectasis	3	—	—	—	3
Broncho-pneumonia	2	—	—	—	2
Microcephaly ..	1	—	—	—	1
Heart Disease ..	—	1	—	—	1
Toxaemia	—	1	—	—	1
Septicaemia ..	—	—	—	1	1
Icterus gravis neonatorum ..	2	—	—	—	2
Asphyxia neonatorum ..	3	—	—	—	3

Cause of Death	1-3 months	4-6 months	7-9 months	10-12 months	Total deaths 1-12 months
Broncho-pneumonia	3	—	1	1	5
Congenital Heart Disease	1	1	—	1	3
Haematemesis ..	—	—	—	1	1
Myelocoele	1	—	—	—	1
Bronchitis	1	—	—	—	1
Whooping Cough ..	1	—	—	—	1

Comparative Birth and Death Rates for the Year 1957

	Rate per 1,000 Home Population		Annual Death Rate per 1,000 Home Population	Rate per 1,000 Live Births
	Live Births	Still Births	All Causes	Total Deaths under 1 Year
England and Wales	16·1	·37	11·5	23·0
Woking	16·84*	·42	9·94*	30·75

* After correction by Registrar General's Comparability Factor.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

(a) Laboratory Facilities

The district is fortunate in having the services of St. Peter's Pathological and Bacteriological Laboratory and it is especially used by the majority of general practitioners. In addition, the Public Health Laboratory at St. Luke's Hospital, Guildford, gives most valuable service for the examination of any large scale investigation and in addition receives the Public Health Department's routine samples of food of all kinds, especially milk, water and ice cream. As previously, samples of water for chemical examination are sent to the Royal Institute of Public Health and Hygiene, London.

During the year the following specimens were examined by the Public Health Laboratory at Guildford:—

Specimens of faeces	..	..	..	..	675
Other specimens	..	..	..	..	12
Samples of milk	..	..	..	..	82
Samples of cream	..	..	..	..	6
Samples of ice cream	..	..	..	..	40
Samples of water	..	..	..	..	47

(b) Ambulance Facilities

Under the National Health Service Act, 1946, the Ambulance Service is administered by the Surrey County Council.

Ambulances are supplied from the Ambulance Control Station, Guildford Road, Chertsey (Tel. Woking 3040), which is operated directly by the County Council. Two County ambulances are garaged in Boundary Road, Woking, one of which is fully manned throughout the 24 hours, and the other is manned for 5½ days per week. There is also one Red Cross ambulance garaged in Walton Road which is manned as follows: Monday–Friday 7–10 p.m., Saturday 2–10 p.m., and Sunday 10 a.m.–10 p.m.

(c) Nursing in the Home

Twelve nurses who are acting in the capacity of District Nurses or Domiciliary Midwives are provided by the Surrey County Council for work in the Urban District, and during the year 1957 some 25,372 visits were paid to 1,116 patients. They also paid 11,866 visits to 468 midwifery patients. Details of these nurses are given below.

Miss H. F. Bisseneek	Helvetia, High Street,	Woking 511
	Horsell	
Misses L. M. J. B. and M. R. B. Callender	Carberry, Kingfield Road,	Woking 1559
	Woking	

Miss M. Cook	1 Ulwin Avenue, Byfleet	Byfleet 2658
Miss F. E. Johnson	91 Woodlands Avenue, West Byfleet	Byfleet 448
Mrs. H. Rubner	Journey's End, 22 Vic- toria Road, Knaphill	Brookwood 3230
Mrs. A. Brunskill	St. Teresa, 16 Victoria Road, Knaphill	Brookwood 3298
Mrs. M. E. Backshall	Savernake, Connaught Road, Brookwood	Brookwood 2125
Miss L. Wilson, Miss J. M. Pollard Miss M. Fielding	} St. Fillans, Maybury Hill, Woking	Woking 2732
Miss F. Richards		
	169 Albert Drive, Sheer- water	Byfleet 3752

(d) Hospitals

The district is well served especially by the following hospitals, the first three named being in the Urban District Council's boundary.

Woking and District Victoria Hospital.

Rowley Bristow Hospital, Pyrford.

Brookwood Hospital, Knaphill.

St. Peter's Hospital, Chertsey.

Ottershaw Hospital—Infectious Diseases and Chronic Sick.

The services given at the Woking and District Victoria Hospital are essentially limited in scope owing to the need for expanding the number of beds, but during the year a new block was completed to give additional facilities for out-patient work and X-rays.

It would be appropriate also at this stage to comment on the difficulty which is experienced by general practitioners in Woking, in common with other areas, in securing hospital accommodation for their chronic sick patients.

A clinic for the treatment of chest diseases is held at the Surrey County Council Clinic, Clarence Avenue, Woking, and the Victoria Hospital, Woking.

The clinics for the treatment of Venereal Diseases are situated at the Royal Surrey County Hospital, Guildford, and Woking Victoria Hospital.

The following sessions are held at Woking and District Victoria Hospital:—

Males Thursday, 5–7 p.m.

Females Tuesday, 4–7 p.m. (discontinued 31.10.57)

National Assistance Act, 1948

No cases were reported to the Department during the year, and no action was deemed necessary under Section 47 of this Act.

Ottershaw Isolation Hospital

The following table shows the number of cases admitted to the Isolation Hospital during 1957:—

Whooping Cough	..	..	..	4 cases
Scarlet Fever	..	..	..	1 „
Measles	..	..	..	7 „
Dysentery	..	..	..	2 „
Gastro-enteritis	..	..	..	19 „
Tonsillitis	..	..	..	1 „
Bronchitis	..	..	..	1 „
Poliomyelitis	..	..	..	3 „
Glandular Fever	..	..	..	2 „
Other Diseases	..	..	..	18 „
Total				58

MATERNITY SERVICES

The Woking Maternity Hospital in Heathside Road continued its valuable services and during the year 1,482 patients were admitted, a number slightly less than that for 1956. Of these approximately half were mothers normally resident outside the Urban District area.

Clinics.—Ante-natal clinics are held daily. Post-natal clinics are held every Monday morning except the second Monday of each month. Baby clinics are held every Monday and Friday afternoon. Fertility clinics are held every Wednesday morning.

During the year the Woking and District Victoria Hospital showed the following figures:—

Number of In-patients admitted 1,696

Number of Out-patient attendances:—

Consultative Clinics	..	..	..	12,834
Casualty	..	..	..	16,237
V.D. Clinics	..	..	..	324
Orthoptic	..	..	..	2,339

SURREY COUNTY COUNCIL CLINICS

<i>Centre</i>	<i>Address</i>	<i>Clinic</i>	<i>Day</i>
WOKING	Maternity Hospital, Heathside Road S.C.C. Clinic, Clarence Avenue Penlee, Claremont Avenue	Ante-natal Welfare Dental Eye Minor Ailments Child Guidance Speech Dental	Wednesday, p.m. Friday, a.m. Wednesday, p.m. Tuesday, a.m. and p.m. Wednesday, a.m. and p.m. Thursday, a.m. and p.m. Friday, a.m. and p.m. Thursday, a.m. (1st and 3rd) Thursday, p.m. Wednesday, a.m. Full time Full time Monday, a.m. and p.m. Tuesday, a.m. and p.m. Thursday, a.m. and p.m. Friday, a.m. and p.m.
BYFLEET	Methodist Hall, Byfleet	Welfare Dental Minor Ailments	Wednesday, p.m. Thursday, a.m. Thursday, a.m.
HORSELL	The Village Hall	Welfare Minor Ailments	Friday, p.m. Friday, p.m.
KNAPHILL	Trinity Church Hall, Chobham Road	Welfare Minor Ailments	Friday, p.m. Friday, p.m.
WESTFIELD	St. Peter's Church Hall, Old Woking	Welfare Minor Ailments	Tuesday, p.m. Tuesday, a.m.
ST. JOHN'S	Memorial Hall	Welfare Minor Ailments	Thursday, p.m. (2nd and 4th) Thursday, p.m. (2nd and 4th)
SHEER- WATER	St. Michael's Hall	General Medical Welfare	Monday, a.m. Monday, p.m.
MAYBURY	The Scout Hut, Oriental Road	Minor Ailments Welfare	Thursday, p.m. (1st and 3rd) Thursday, p.m. (1st and 3rd)
PYRFORD	The Village Hall	Minor Ailments Welfare	Monday, p.m. (2nd and 4th) Monday, p.m. (2nd and 4th)

WELFARE FOOD SERVICES

The Welfare Foods may be obtained from any of the above Welfare Clinics and in addition we are indebted to the good services of the W.V.S. who distribute as follows:—

Sharrard House, Heathside Road, Woking	Monday–Friday, 2.15–4.30 p.m.
121 Chertsey Road, Woking	Monday–Friday, 10 a.m.–12 noon

CHIROPODY SERVICES FOR OLD PEOPLE

A Chiropody Clinic is held on Tuesday morning and afternoon each week at the Red Cross Centre, Walton Road, Woking. Appointments should be made with the Guild of Social Service, 6A Guildford Road, Woking.

FAMILY PLANNING ASSOCIATION

Under the auspices of the Family Planning Association advice may be obtained from the Association at 77A Chertsey Road, Woking, between 2.30 and 3.30 p.m. on each Wednesday, and also the last two Tuesday evenings in each month from 7 to 8.30 p.m. All interviews are by appointment only and should be made by writing to the Association or telephoning Woking 3059.

INFECTIOUS DISEASES

Scarlet Fever.—Only 15 cases were notified during the year, but as is customary this disease is now so mild that many cases of an atypical nature occur, frequently with a very transient rash. There were no complications and from a point of view of control this infection is now of less importance than tonsillitis.

Measles.—741 cases were notified during the year. Complications of this disease were negligible due to the value of sulphonamides and antibiotics in their prevention and treatment. There were no deaths. It is important, however, that the majority of such children should have their chests X-rayed after this infection, and this procedure is carried out invariably as a routine in the case of those admitted to hospital.

Puerperal Pyrexia.—This notifiable condition was properly reported by the Woking Maternity Hospital in the majority of instances and it is defined as “any febrile condition occurring in a woman in whom a temperature of 100·4° Fahrenheit (38° centigrade) or more has occurred within fourteen days after childbirth or miscarriage.” In many cases, therefore, it is of little significance, but it always requires

Infectious Diseases, 1957

NOTIFIABLE DISEASE	CASES NOTIFIED IN WHOLE DISTRICT													WARDS									Cases admitted to Hospital	Total Deaths
	At all Ages	At Ages—Years												Byfleet	Central	Horsell	Knaphill and Brookwood	Maybury and Mount Hermon	Old Woking, Mayford and Sutton	St. John's	Woodham and Sheerwater	West Byfleet and Pyrford		
		At Ages—Years																						
		Under 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 65												65 and over
Whooping Cough	174	10	10	11	16	16	96	13	1	—	—	—	—	—	9	11	15	6	15	55	6	4	2	
Scarlet Fever	15	—	—	1	1	1	8	2	—	—	—	—	—	—	—	—	1	—	11	—	—	1	—	
Measles	741	11	54	76	87	89	394	16	3	1	3	5	2	—	4	15	41	38	138	203	96	7	—	
Diphtheria	—	6	1	1	—	2	14	—	1	5	4	3	8	11	2	10	7	—	16	5	4	—	30	
Pneumonia	58	—	—	—	—	—	—	—	6	29	45	14	—	—	—	—	1	—	—	—	—	—	1	
Puerperal Pyrexia	94	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	1	—	—	3	—	
Acute Poliomyelitis	3	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	
Meningococcal Infections	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	
Erysipelas	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	
Dysentery	53	3	1	3	1	4	24	6	1	—	4	4	2	1	2	2	23	1	2	—	3	2	—	
Typhoid	1	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	—	—	—	—	1	—	
Food Poisoning	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	—	
Tuberculosis:—																								
Non-Pulmonary	7	—	—	—	—	—	1	2	—	1	3	—	—	—	2	2	—	—	2	3	—	4	—	
Pulmonary	60	—	—	—	—	—	1	2	4	9	16	9	19	—	7	2	2	8	8	15	10	6	4	
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Acute Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Paratyphoid	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	

investigations which eliminate the possibility of the rise of temperature being due to infective conditions which are themselves invariably now well controlled, again by the use of antibiotics.

Dysentery.—All the 50 odd cases notified were known to be caused by *B. sonnei* dysentery, and in the majority of cases the infection was mild, and in some cases the notification represented only that the person was a “carrier” of this condition. The infection can, however, be responsible for very acute symptoms, and special measures must be taken in the case of those employed in the food trade. The majority of infection occurred in children in the 5–10 year old age group and especially in the Monument Hill Infant School in the early part of the year.

Whooping Cough.—174 cases of this disease were notified during the year. Complications, as with measles, were negligible due to the value of sulphonamides and antibiotics in their prevention and treatment. There were two deaths, one in a baby of two months and the other a child of 21 months. There is frequently the same need for the majority of these cases to have their chests X-rayed after this infection, and this procedure, as for measles, is invariably followed in the case of those admitted to hospital.

Poliomyelitis.—3 cases of this disease were notified during the year in adults, two women and one man. One fatal case of acute bulbar paralysis occurred and was confirmed virologically as being Type II, the second case was not identified and was probably contracted abroad, and the third case was of Type I.

DIPHTHERIA IMMUNISATION

There was again no recorded case of diphtheria during the year. The following figures give the Immunity Index at 31st December, 1957: this index shows the percentage of children who have, within the last five years, received either their first course of injections or a subsequent reinforcing dose.

Immunity Index

Under 1 year	1–4 years	5–14 years
14·1	73·0	55·2

During the year 321 children were given their primary course of immunisation and 725 their reinforcement doses. This work was carried out in clinics or at schools and an attempt is now made to visit each school each year although the programme is occasionally upset

by the incidence of poliomyelitis when it may be desirable to suspend injections of all kinds. In addition private practitioners gave 679 primary immunisations and 243 reinforcing injections during the year.

It is most important to see that all children receive their first injections before reaching one year of age.

Almost all the children immunised against diphtheria were at the same time protected against whooping cough, and in addition some 346 of these children received an element of protection against tetanus as well in the form of the triple antigen.

VACCINATION

779 children under 14 years of age and 215 adults were vaccinated during the year.

TUBERCULOSIS

New Cases and Mortality during 1957.

AGE PERIODS	NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
0-1	—	—	—	—	—	—	—	—
1-5	—	—	—	—	—	—	—	—
5-15	2	1	1	2	—	—	—	—
15-25	5	8	—	1	—	—	—	—
25-35	6	10	—	3	—	1	—	—
35-45	8	1	—	—	1	—	—	—
45-55	6	5	—	—	—	—	—	—
55-65	6	2	—	—	2	—	—	—
65 and upwards	—	—	—	—	—	—	—	—
Totals ..	33	27	1	6	3	1	—	—

The number of cases of Tuberculosis notified during the year ending 31st December was 67, as will be seen from the following table:—

Number notified by General Practitioners	..	..	5
Number notified by Institutions and Clinics	..	..	29
Number transferred to Woking	..	..	32
Number notified after death	..	..	1

The following table shows the number of cases notified annually since 1953, and the number of deaths which occurred:—

YEAR	NUMBER ON REGISTER				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
1953	248	168	30	31	5	3	—	1
1954	271	191	31	35	2	1	—	—
1955	294	218	31	39	2	2	—	1
1956	306	219	32	45	3	1	—	—
1957	314	214	29	47	3	1	—	—

B.C.G. VACCINATION, 1957

Children 13–14 years

Age Group	Consent		Mantoux Test				Vaccination	
	No.	% of Age Group	+ve No.	% of Test	—ve No.	% of Test	No.	% of Age Group
769	398	51·8	40	11·4	311	88·6	305	39·7

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925

No action was necessary under these Regulations regarding tuberculous employees in the milk trade.

PUBLIC HEALTH ACT, 1936, SEC. 172

No action was needed for the compulsory removal to Hospital of infectious persons suffering from Pulmonary Tuberculosis whose lodging or accommodation prevented the adoption of proper precautions to prevent the spread of infection or who were not taking such precautions.

The County Council is responsible for care and after-care measures and these are supervised through local Committees. The funds available are derived from grants made through the County-rate and by voluntary effort. The Committees are responsible for arrangements in relation to such matters as holiday camps for children from tuberculous households, and occupational therapy materials.

Three families were rehoused by the Council by reason of tuberculosis.

PREVENTION OF BLINDNESS

No action was taken under Section 176 of the Public Health Act, 1936, the matter being in the hands of the Surrey County Council.

The Surrey County Council is also responsible, in conjunction with the District Welfare Committee, for all matters relating to services provided under Section 29 and Section 30 of the National Assistance Act. Provisions are made for the registration of the blind and for such persons the services of education, home employment, the provision of books, the provision of homes and hostels, and the provision of financial payments are maintained. Much of the work in connection with the blind is carried out by the Surrey Voluntary Association for the Blind in co-operation with the County Council. In addition the Council has extended the services to certain classes of partially sighted persons.

SCHOOLS

There are in the district 18 Primary, 6 Secondary Modern, 2 Grammar and 21 Independent schools. It is customary for head teachers to notify the Medical Officer of Health and the School Medical Officer of absences from schools in the case of suspected infectious diseases.

During the year all school canteens and kitchens were again sprayed for the purpose of limiting the fly and insect population in those premises. It is unfortunate, however, that the majority of flies are now acquiring a considerable degree of resistance to the chlorinated hydrocarbons.

MILK SUPPLY

During this year, the third in which all milk sold within the Urban District was required to be heat treated or Tuberculin Tested, 82 samples of milk were submitted for bacteriological examination, and of these, three were also submitted for biological examination.

It is most reassuring to find that these samples were reported upon as satisfactory in all cases.

Details of the tests to which these 82 samples were subjected are as follows:—

Designation of Milk	Phosphatase Test	Methylene Blue Test	Turbidity Test	Biological Test
Pasteurised	*36	36	—	—
T.T. Pasteurised	22	22	—	—
Sterilised	—	—	7	—
T.T. farm bottled	—	16	—	3
Goats' milk	—	1	—	—

* Includes 8 samples of pasteurised milk taken from schools.

The phosphatase test gives an indication of efficiency or otherwise of pasteurisation, whilst the methylene blue test determines keeping quality and cleanliness. Efficiency of sterilisation is checked by means of the turbidity test and biological examination is used to detect any tubercular infection in milk.

MILK PRODUCTS

Three samples of fresh single cream and three samples of fresh double cream were submitted for bacteriological examination.

The three samples of single cream, which were the product of a local farmer, were reported upon as failing the methylene blue test. Representations were made to the manufacturer and improvement shown in subsequent samples.

ICE CREAM

All the ice cream sold in the Urban District is manufactured outside the district, principally by firms of national repute.

During the year 40 samples of ice cream were submitted for bacteriological examination to the Public Health Laboratory, St. Luke's Hospital, Guildford.

The bacteriological standard of the ice cream remained high, 29 samples falling within Grade I and 9 in Grade II.

Two samples, however, were reported upon as being in Grades III and IV respectively, but repeated follow up samples of these ice creams showed satisfactory results.

SWIMMING POOLS

The Swimming Pool opened in 1935 in Woking Park continues in popularity with residents and visitors. Its modern filtration, aeration and chlorination plant provides a complete turnover of the 425,000 gallons it contains every 5 hours, and the water is tested for alkalinity and acidity twice daily. The bacteriological standard of the water continued to be satisfactory. During 1957, the number of admissions were 110,542 as against 51,669 for the year previous.

There are no privately-owned Swimming Pools open to the public in the district.

WATER SUPPLY

As described in previous Reports, the water is supplied by the Woking and District Water Company from its stations at Chertsey, West Horsley, West Clandon, and a supply in bulk by statute from the Guildford Corporation. The West Surrey Water Company supplies the Byfleet area.

The Woking and District Water Company's mains were extended 3,391 yards in the Urban District during 1957, and those of the West Surrey Water Co. by 1,145 yards.

With few exceptions water is laid on to the interior of the houses.

Two samples of Company water were taken and found to be satisfactory. Chemical examinations are made by the Royal Institute of Public Health and Hygiene.

Wells.—Four houses are still dependent on shallow wells for their water supply. Samples of these waters are taken regularly to check their purity. Some of these houses are too remote to make mains supply practicable. Thirteen samples of these waters were taken during the year. All new houses are provided with a mains supply.

DRAINAGE ARRANGEMENTS

Every effort was made by the Council during the past year to obtain permission to carry out the various drainage schemes which had been prepared in order to provide main drainage facilities in areas where these do not exist and where applications for large scale development had been received.

The Minister of Housing and Local Government gave permission for tenders to be invited for the Western Trunk Sewer Relief Scheme and the amended Hoe Valley Sewer Extension Scheme. Tenders have been accepted by the Council for the Western Trunk Sewer Relief Scheme and those for the Hoe Valley Sewer Extension will be invited shortly. It is hoped that Ministry approval will be given to commence work on both these schemes in 1958.

A further representation was made to the Ministry regarding the reconstruction of the Woking Sewage Disposal Works and consideration is now being given by the Minister to the question of allowing the scheme to proceed.

Details of the Consulting Engineers' scheme for a new pumping station in Walton Road and alterations to the East Hill and Old Woking Pumping stations have been forwarded to the Ministry for approval.

I am indebted to Mr. H. P. Tame, Engineer and Surveyor to the Council, for his assistance in supplying this information.

Public Health Department.
29th May, 1958.

To the Chairman and Members of the Public Health Committee

MADAM CHAIRMAN, LADIES AND GENTLEMEN,

To the Public Health Inspectors of Woking, 1957 was another year of interesting opportunities to pursue the work of environmental hygiene to the advantage of the residents. Much valuable work was achieved in housing repair, and within the limitations of restricted construction of new council houses a slight inroad was made on the slum clearance programme.

Older members of public health department staffs are very conscious of a gradual change in the style of duties and responsibilities of technical staff. In substitution for much of the routine work of pre-war years one encounters more specialised duties, and an extension of the policy of improved health circumstances through health education. As the result of these changes a substantial proportion of time is spent in advising traders and householders and assisting them in an informal manner in the solution of the many problems which seem to arise.

Woking is unfortunate in being plagued with a mosquito problem, probably without equal in our own country, and a good deal of time has been occupied in preparing plans based on research and experiment, which it is hoped will offer at least a partial solution to the difficulties. 1958, therefore, promises to be a year of hard work in a sphere of public health a little out of the ordinary and we await these experiences with interest.

In so far as my responsibilities for control and supervision are concerned, it is once more my pleasure to express thanks to my own staff for their continued support and to the Councillors, especially those of the Public Health and Drainage Committee, for help and consideration of the many problems involved.

Yours respectfully,

A. G. DAVIES,

Chief Public Health Inspector.

SANITARY INSPECTION

The following is a classification of the number and nature of the inspections made during 1957.

Inspections under Housing Act, 1936	..	..	..	..	74
Inspections of dwellings under Public Health Acts	..	..			973
Inspections of dwellings occupied by applicants for Council Houses	..	..	..	..	33
Enquiries <i>re</i> infectious diseases	..	..	..	..	739
Investigations <i>re</i> overcrowding	..	..	..	..	2
Visits to slaughterhouses	..	..	..	..	478
„ „ places of entertainment	..	..	..	..	9
„ „ dairies	..	..	..	..	38
„ „ bakeries	..	..	..	..	101
„ „ other food premises	..	..	..	..	234
„ „ factory and school canteens	..	..	..	..	75
„ „ licensed houses and hotels	..	..	..	..	16
„ „ moveable dwellings	..	..	..	..	386
„ „ factories, workplaces, offices, etc.	..	..	..	..	298
„ „ verminous premises	..	..	..	..	35
„ „ mobile food vans	..	..	..	..	15
„ „ premises where ice-cream is manufactured, stored or sold	..	..	..	..	110
„ „ market stalls and mobile food shops	..	..	..	..	286
„ „ schools <i>re</i> conveniences, etc.	..	..	..	..	26
Drain tests	..	..	..	..	14
Inspections concerning smoke nuisance	..	..	..	..	67
„ „ drainage systems	..	..	..	..	323
„ „ Shops Act, 1950 (Section 38)	..	..	..	..	173
„ „ rodent infestation (by Health Inspectors)					600
„ „ pest control (by Health Inspectors)	..				302
„ „ pollution of streams, etc.	..	..	..	..	171
„ „ refuse tips, etc.	..	..	..	..	901
„ „ Pet Animals Act	..	..	..	..	35
„ „ public conveniences	..	..	..	..	15
„ „ mosquito control measures	..	..	..	..	191
„ „ keeping of animals	..	..	..	..	16
„ „ swimming pools	..	..	..	..	20
„ „ exhumations	..	..	..	..	2
„ „ food poisoning	..	..	..	..	24
Miscellaneous	..	..	..	..	478
Total number of visits	..	..	..	..	7,260
Re-inspections	..	..	..	..	2,150

The efforts of the public health inspectors during the year resulted in a substantial amount of repair work being carried out in dwelling-houses, remedies being secured for all the more serious defects brought to the notice of the Department.

In pursuit of this work much time has to be spent in negotiation with agents, owners and builders.

HOUSING

1. *Inspection of dwelling-houses during the year*

(a) Total number of dwelling-houses inspected for housing defects under the Public Health or Housing Acts ..	1,047
(b) Number of dwelling-houses (included under sub-head (a) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	74
(c) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	16
(d) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	821

2. *Remedy of defects during the year*

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	482
---	-----

Every effort is made to secure the repair or reconditioning of dwelling-houses by negotiation rather than statutory action. Where such action fails, formal notices are served under the appropriate statutory authority, the numbers for 1957 being:—

Preliminary notices	281
Statutory notices:—	
Public Health Act, 1936, Section 75	7
Public Health Act, 1936, Section 93	8
Public Health Act, 1936, Section 44	1
Housing Act, 1936, Section 9	13

The Housing Act, 1957, came into force on the 1st September. It does not change the existing law on the subject, the object of the Act as stated in the title, being to consolidate “the enactments relating to housing with the exception of certain provisions relating to financial matters.”

3. *Clearance of unfit houses*

Very little progress could be made during the year with the clearance of unfit houses due to the considerable reduction in the number of new houses available for re-housing. Four individual unfit houses were demolished as a result of action taken in 1956. Procedure in respect of the Victoria Road, Knaphill, Clearance Area was completed with the purchase of the site by the Council and the subsequent demolition of the eight houses involved. Closing Orders in operation against two houses were revoked after extensive works had been carried out to make them reasonably suitable for habitation. Ten families were re-housed by the Council from unfit properties during the year.

4. *Rent Act, 1957*

This Act came into force on the 6th July, and it is probable that no previous legislation on this subject has been accompanied by such widespread expressions of alarm and hope, according to one's particular point of view. The impact on the work of the Department has been considerable and is not completely reflected in the figures given below for the period 6th July to 31st December.

(1) Number of applications for Certificates of Disrepair	..	61
(2) Number of decisions to issue Certificates:		
(a) in respect of some but not all defects	.. ..	44
(b) in respect of all defects	.. ..	17
(3) Number of undertakings given by landlords under paragraph 5 of the First Schedule	.. ..	17
(4) Number of Certificates issued	.. ..	31
(5) Number of applications by landlords for cancellation of Certificates	.. ..	4
(6) Number of Certificates cancelled	.. ..	2

5. *Housing Waiting List*

During the year the Housing Waiting List was reorganised and the position at the 31st December, 1957, was as follows:—

Priority Register

Applicants in self-contained accommodation	.. ..	56
Applicants in shared accommodation or caravans..	..	316
Old people in shared accommodation except for those who occupy by reason of a service tenancy	.. ..	96
Slum clearance	.. ..	1

Qualifying List

Applications made one year ago or less from all types of applicants in self-contained and shared accommodation 113

Non-Priority Register

Applicants whose living conditions at present render them ineligible for rehousing by the Council at any time in the future 823

6. Housing Development

The following is a statement of the number of houses erected in the Urban District during 1957:—

(a) by the local authority:

3-bedroom houses	..	..	..	..	..	37
2-bedroom houses	..	..	..	..	..	10

(b) by private enterprise	631
---------------------------	----	----	----	----	----	-----

In addition to these figures 61 houses were in course of construction at the end of the year by the local authority and 340 by private enterprise.

FACTORY INSPECTIONS

1.—INSPECTIONS FOR PURPOSE OF PROVISION AS TO HEALTH

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	24	26	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by Local Authority	211	272	10	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) ..	—	—	—	—
TOTAL	235	298	—	10

2.—CASES IN WHICH DEFECTS WERE FOUND

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S. 1)	4	4	—	—	—
Overcrowding (S. 2) ..	—	—	—	—	—
Unreasonable temperature (S. 3)	—	—	—	—	—
Inadequate ventilation (S. 4)	1	1	—	1	—
Ineffective drainage of floors (S. 6)	—	—	—	—	—
Sanitary conveniences (S. 7):					
(a) Insufficient ..	—	—	—	—	—
(b) Unsuitable or defective	5	5	—	5	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to outwork)	—	—	—	—	—
TOTAL	10	10	—	6	—

MOVEABLE DWELLINGS

Number of sites used for parking 2 or more caravans	5
Number of caravans on each site:	
Warren Farm, Pyrford (41 for week-end use only)	98
The Cedars, Byfleet	20
Brewery Lane, Byfleet	12
Arden House, Byfleet	31
Vinery Nurseries, Byfleet	5
Licences issued during the year under Public Health Act, 1936, Sec. 269	1
Number of licences renewed	4

INSPECTION AND SUPERVISION OF FOOD

Efforts to raise the hygienic standard of food handling in food premises throughout the district has continued during the year. The Public Health Inspectors made 479 visits to food shops, cafés, bake-houses, licensed premises, etc., and it is becoming increasingly apparent that this personal contact is playing a major part in the improvements that are being effected. Relations with all branches of the trade continue to be good.

Fewer complaints of extraneous matter in food, or other unsound conditions were made by the public during the year, compared with previous years. The six complaints received were thoroughly investigated and appropriate action was taken in every case. Legal proceedings were taken in one instance in respect of a loaf containing a cigarette end. The case was, however, dismissed on grounds of insufficient evidence.

Nine lectures on food hygiene and food poisoning were given and were augmented by visual aids, photographs and films.

As part of the constant activity to maintain food standards, the following samples were obtained during the year, exclusive of those taken in the course of our responsibilities in connection with food and drugs legislation.

Chemical analysis—

Water	3
-------	----	----	----	----	----	----	---

Bacteriological examination—

Water	..	..	..	..	..	..	47
Milk	..	..	..	..	..	..	82
Ice-cream	..	..	..	..	..	..	40
Synthetic fillings	..	..	..	..	..	..	13
Canned foods	..	..	..	..	..	..	8

At the end of the year there were 455 food premises in the urban district, classified as follows:—

Bakehouses and bakers' shops	..	..	..	30
Butchers' shops	..	..	..	45
Cafés and restaurants	..	..	..	40
Confectioners	..	..	..	54
Fishmongers' and fried fish shops			..	24
Greengrocers	..	..	..	42
Grocers	..	..	..	129
Factory and school canteens			..	53
Licensed houses	..	..	..	38

Thirty-three premises are now registered under Section 16 of the Food and Drugs Act, 1955, for the manufacture of sausages. Nine additional premises were registered during the year for the sale of ice-cream.

MEAT AND OTHER FOODS

The total amount of ALL unsound food surrendered during the year was slightly less than 2 tons:—

					TONS	CWT.	QR.	LB.
Meat	..	..	..	..	1	5	1	23
Fish	..	..	..	..	—	1	—	27
Fruit and vegetables			..	..	—	3	1	12
Cheese	..	..	..	..	—	—	2	2
Jam	..	..	..	..	—	—	2	3
Canned foods		..	..	..	—	5	—	16
Miscellaneous		..	..	..	—	2	—	10
Total					1	18	1	9

One of the most important tasks undertaken by public health inspectors is that of meat inspection in slaughterhouses, a work which unfortunately has to be carried out largely at very inconvenient hours and under conditions which although gradually improving are still anything but wholly desirable having regard to the importance of the work. It is gratifying to be able to report 100 per cent inspection of all animals slaughtered, although this has necessitated one or more members of the staff being engaged on five evenings a week, often until 11 p.m. The Council has now recognised the difficult nature of this work by making an additional payment of salary to each of the inspectors involved.

TABLE 1
Meat Inspection Comparative Table

Year	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Total
1951	—	—	16	4	175	195
1952	—	—	9	7	162	178
1953	—	—	14	4	95	113
1954	130	3	114	291	433	971
1955	209	3	289	501	1,885	2,887
1956	341	—	521	1,150	2,696	4,708
1957	432	—	572	1,201	2,582	4,787

TABLE 2

Carcases Inspected and Condemned during 1957

	Cattle excluding cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	432	—	572	1,201	2,582
Number inspected	432	—	572	1,201	2,582
<i>All diseases except Tuberculosis—</i>					
Whole carcases condemned ..	—	—	—	—	3
Carcases of which some part or organ was condemned ..	53	—	1	44	256
Percentage of the number in- spected affected with disease other than tuberculosis ..	12·2	—	0·2	3·7	10·4
<i>Tuberculosis only—</i>					
Whole carcases condemned ..	—	—	—	—	1
Carcases of which some part or organ was condemned ..	13	—	—	—	26
Percentage of the number in- spected affected with tuber- culosis	3·0	—	—	—	1·4

ADULTERATION OF FOOD

During the year 108 samples of various foodstuffs and drugs were taken in accordance with the Food and Drugs Act, 1955.

Details of these samples are given in the following table and it will be noted that in nine cases the samples were reported upon by the Public Analyst as being adulterated or irregular.

Infringements of the Labelling of Food Order, 1953, were found with respect to samples of sponge mixture, Devon cream, milk shake powder, single cream and Christmas pudding, and two samples of meringue powder. In the case of a sample of evaporated milk, infringement of the Condensed Milk Regulations was reported. A sample of home-made marmalade was found to be 9 per cent deficient in soluble solids and manufacture was ceased voluntarily.

In all cases, the infringements were of a minor character and representation made to the respective manufacturers proved successful.

Articles	Analysed			Adulterated or Irregular		
	Formal	In-formal	Total	Formal	In-formal	Total
<i>Food:</i>						
Almonds—ground	—	1	1	—	—	—
Angelica	—	1	1	—	—	—
Anchovy paste	—	1	1	—	—	—
Batter mixture	1	—	1	—	—	—
Beer	2	—	2	—	—	—
Bread	—	1	1	—	—	—
Butter	—	2	2	—	—	—
Caviar	—	1	1	—	—	—
Cheese—Swiss Gruyere process	—	1	1	—	—	—
Cheese spread	—	3	3	—	—	—
Cheese—cream	—	1	1	—	—	—
Coffee	—	1	1	—	—	—
Cooking oil	—	1	1	—	—	—
Cooking crumbs	—	1	1	—	—	—
Confectionery—sugar	—	2	2	—	—	—
Cocktail savoury	—	1	1	—	—	—
Cream—Devon	1	—	1	1	—	1
Cream—single	—	2	2	—	1	1
Cream—double	—	2	2	—	—	—
Cream—sterilised	1	1	2	—	—	—
Cream—tinned	—	1	1	—	—	—
Christmas pudding	—	1	1	—	1	1
Curry powder	—	1	1	—	—	—
Cordial	3	—	3	—	—	—
Essence—almond	—	1	1	—	—	—
Essence—vanilla	—	1	1	—	—	—
Fishcakes	—	1	1	—	—	—
Gherkins	—	1	1	—	—	—
Gin	1	—	1	—	—	—
Gravy powder	—	1	1	—	—	—
Herrings—tinned.. ..	—	1	1	—	—	—
Honey	1	—	1	—	—	—
Ice cream	7	—	7	—	—	—
Icing sugar	—	1	1	—	—	—
Jelly—crystallised	—	1	1	—	—	—
Jelly—fruit	—	1	1	—	—	—
Jelly—table	—	1	1	—	—	—
Lemonade powder	1	—	1	—	—	—
Meat extract	—	1	1	—	—	—
Marzipan	—	2	2	—	—	—
Meringue powder	1	1	2	1	1	2
Mayonnaise	—	1	1	—	—	—
Marmalade	—	1	1	—	1	1
Milk	13	3	16	—	—	—
Milk—hot	1	—	1	—	—	—
Milk—evaporated	1	1	2	1	—	1
Milk—goat	—	1	1	—	—	—
Milk shake powder	—	1	1	—	1	1
Mincemeat	—	2	2	—	—	—

Articles	Analysed			Adulterated or Irregular		
	Formal	In-formal	Total	Formal	In-formal	Total
Oil—olive	—	1	1	—	—	—
Orange curd	—	1	1	—	—	—
Orange drink	2	—	2	—	—	—
Orange crush	1	—	1	—	—	—
Pepper—white	—	1	1	—	—	—
Sausages—beef	—	2	2	—	—	—
Sausages—pork	—	3	3	—	—	—
Saffron yellow	—	1	1	—	—	—
Semolina	1	—	1	—	—	—
Sherry	1	—	1	—	—	—
Soupmix—chicken	—	1	1	—	—	—
Sponge mixture	1	2	3	—	1	1
Sodium glutamate	—	1	1	—	—	—
Vinegar—malt	2	—	2	—	—	—
Whisky	—	1	1	—	—	—
Yeast	—	1	1	—	—	—
<i>Drugs</i>						
Phoscodin tablets	—	1	1	—	—	—
Totals	42	66	108	3	6	9

WATER SUPPLY

The effort to secure a piped supply of water to every house in the district has continued and the four houses enumerated below are the only properties from which drinking water supplies are now derived wholly from shallow wells:—

Fullers, Prey Heath.
Holly Cottage, Pyrford Green.
Boundary Cottage, Bagshot Road.
Fishers Farm, Lower Westfield.

BURIAL OF THE DEAD

During the year arrangements were made on one occasion for a burial under Section 50 of the National Assistance Act, 1948.

RODENT AND PEST CONTROL

The problem of rodent infestation is kept well within reasonable bounds, prompt attention being given to complaints, and likely breeding grounds being kept under regular supervision. The free

service to dwelling-houses has been continued and a substantial amount of work on a chargeable basis continues to be carried out on commercial premises.

Disinfestation work for other pests carried out by the department is limited to those having a bearing on public health, i.e. bugs, fleas, cockroaches, flies, but advice is continually being sought by the general public on the best methods of eradication of such pests as woodworm, beetles, wasps, ants, silver fish, etc.

The year 1957 was one in which the number of complaints of biting from mosquitoes increased considerably, a circumstance considered to be due in part to the steadily deteriorating conditions of drainage to many of the houses within the Urban District, to the large acreage of ill-drained common land, and to the fact that the steady increase in urban development tended to introduce a new population unused to this form of nuisance. The Public Health Committee gave consideration to the problem on a number of occasions and many reports were submitted to the Committee by the Medical Officer of Health and myself. A good deal of research work was undertaken, including demonstration spraying activities, and at the close of the year the Council had decided to undertake detailed control measures in 1958 and for this purpose to purchase a Tifa insecticidal fog applicator.

The Tifa machine is designed to produce thermal aerosols of selected droplet diameters; the insecticide, dissolved or suspended in a carrier liquid, is first atomised mechanically and then introduced into a blast of hot air and further fractionised. Sprays or fogs are produced according to need and the material is distributed to a much greater degree of efficiency than is possible by the use of ordinary hand sprays. Where mosquito control work has been carried out in foreign countries by manual means the forces of labour required have been substantial and indeed in our own country and quite close to Woking, work carried out by the military authorities over a relatively small area was assessed to need 34 personnel. Such figures are beyond the reach of any local authority and therefore work of this nature must of necessity involve the employment of mechanical means. During 1958, therefore, it is hoped to carry out routine sprayings through all the essential months of the year, and whilst it is of course quite impossible to give any guarantees, it is sincerely believed that the results will be effective. The machine, used in the hands of capable operators, will create the means of providing a serious effort in the elimination of a problem which has been a scourge to the people of Woking for a very great number of years.

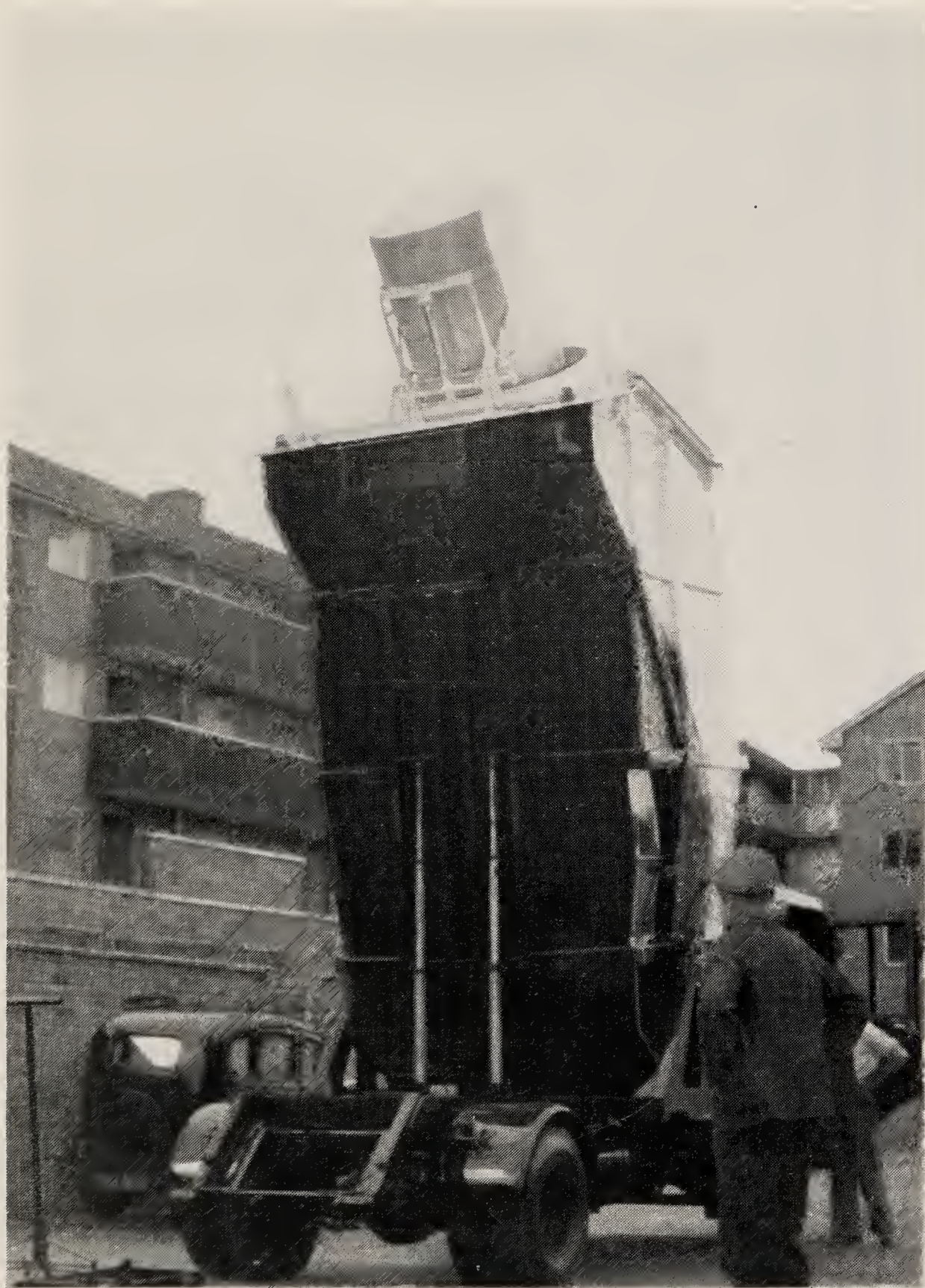
Spraying demonstrations have been accompanied by a great deal of research and more than 800 separate identifications of insects and larvae have been carried out. The work involved proved very complex, but the results appear to have made the effort extremely worthwhile. During the course of the summer six types of mosquito were identified,

namely *Anopheles claviger*, *Aedes cantans*, *Aedes caspius*, *Aedes punctor*, *Culex pipiens*, and *Theobaldia annulata*; the first of these is one of a species in a group capable of carrying malarial infection. The remaining groups include species known for their vicious biting habits and the survey showed conclusively that there was a preponderance of biting insects of great nuisance potential. The results show clearly that there is a definite health risk, both in relation to disease and otherwise, and ample justification, and indeed necessity, for the Council to employ such means as are available in an attempt to reduce the mosquito population. The Medical Officer of Health and myself look forward to 1958 as being an opportunity to introduce practical measures for this purpose.

REFUSE COLLECTION ARRANGEMENTS

It is no longer possible to maintain in Woking a weekly collection of refuse except by the employment of overtime to an extent which in the first place is very expensive and in the second place proves difficult to persuade men to play a part. In any event there comes a time in the work of refuse collection when man's physical capacity is overstretched as the work is very hard and is carried out quite frequently under very unpleasant conditions. Thus overtime working is not in itself an entirely satisfactory solution. It is now safe to assume the population of the district to be approximately 60,000, whereas the population in 1939 was 41,000. In that earlier period we were required to clear refuse from 12,700 premises, whereas to-day's figure is 18,100. The number of employees available for the work of refuse collection to-day is 38 as compared with 32 in 1939. Added to all this the working week in those days was 47 hours but now stands at 44 hours, giving a comparable man hour figure of 79,832 in 1939 as opposed to 86,944 man hours to-day. I apologise for continually stressing these figures, but in a year when no less than 600 new houses have come into use, they offer convincing proof of the task which faces the Council's Cleansing Department. As a matter of interest, the collections were maintained during 1957 only by the addition to the normal working week of 570 hours of overtime and it will be appreciated that in terms of pay this represents considerably more hours than the figure given.

So far as it is possible to ascertain, Woking is the only district in Surrey which maintains a level of collections of 52 per annum, and the general position to-day in most parts of the country is that frequencies vary between 7 and 10 days. A weekly collection, however, has many advantages especially in a period when it is the usual practice for womenfolk also to go out to work. A vast number of our population depend upon a same day of the week collection and this of course is lost the moment the collection rota extends beyond a weekly level. A complete reorganisation of the service is at present under con-



The Woking type of bulk container being unloaded into a rear loading fore and aft tipping vehicle at Sheerwater



Showing the improved method of refuse storage at flats in Dartmouth Avenue

sideration with the sole purpose in view of not only maintaining the present level of collection but providing some small margin for future development. A task of this nature is essentially a large one and will take some time to introduce, whether successful or otherwise, and in the meantime it is unavoidable that there will be alterations of collection days in many areas. The new intention involves a completely new system of collection, whereas the reviews which have taken place every three years for the last twelve years have in general been concerned with modifications of existing arrangements.

The year 1957 saw the introduction of the bulk container system of storage and apart from the many advantages of hygiene there is little doubt that this is for the moment one of the few ways available to improve working conditions, and thereby attract labour and to reduce the time taken in the clearance of dustbins. Although at the time the scheme was adopted it was suggested that twelve containers could be introduced by the end of the year, I am very pleased indeed to report that that figure proved to be 62. Whilst this progress necessitated the continual application of supplementary estimates of expenditure it was felt under the circumstances that this necessity was overshadowed by the results which were accruing as the result of the introduction of the containers. This entirely new innovation in Woking has not been achieved without certain disappointments and experience proved that whilst it was easy to convince the commercial section of the population as to the advantages to be gained it has proved much less easy to persuade public bodies to this way of thinking. In the early stages of the scheme a bin was installed at the Woking Victoria Hospital and at the end of the year we were on the point of securing the provision of four bins at Brookwood Hospital; it is hoped these will lead to a gradual change-over in hospital premises. It is a matter of regret that at the end of the year no bins had been installed in the schools of Woking. Despite this disappointment this would seem an opportunity to express thanks to those of our own Councillors who have advocated bulk container installation in the hospital and education spheres. Refuse collection from schools represents one of the major problems of time delay, largely from the circumstance that whereas school bins were always sited in one reasonably accessible position, it has become increasingly popular to site one or two bins at various points on the school premises to suit the convenience of staff. This necessitates much increased walking distances and the tendency to overlook the emptying of certain bins. Offending schools are now being reminded of the requirement under Council byelaws that all bins must be reasonably accessible for clearance.

Whilst the Joint Works Committee serves to provide an avenue of discussion between Councillors and workmen I think, at least so far as the Cleansing Department is concerned, that the small number of matters brought to the notice of the Committee indicates the generally

acceptable conditions of employment. As the result of an approach to the Joint Committee the Public Health and Drainage Committee authorised the issue of additional protective clothing to the extent of one additional overall jacket and one pair of gloves per man.

Collection of Trade Refuse

During the course of the year the whole of the trade refuse agreements were given reconsideration in the light of the decision to increase the charges and as the result of this decision senior executives of 112 trading concerns were interviewed and discussions took place as to methods of refuse collection and quantities to be collected. As the result of this work the income from trade refuse collection shows an approximate annual increase of £600.

Refuse Disposal

Including the 3,000 tons of refuse received annually from the Chertsey Urban District Council and approximately 1,500 tons of trade waste, the Council is now required to provide disposal facilities for more than 25,000 tons of refuse per annum. During the year, disposal facilities on the Havering Farm site were completed, also the extended area of the Beechwood Road site. The site at the rear of the Camphill Road Depot continues to serve the Byfleet area and may, for a short period, be required to take in the whole of the refuse from the urban district. The district abounds in refuse disposal sites of a suitable nature, but there is an increasing objection, largely arising from new building development, to the use of sites for refuse disposal. There are few sites of any value which are not in proximity to at least some houses and the Council will have to meet the situation whereby these objections must be overcome. It is most important to realise that where tipping to a depth of no more than 6 ft. is possible, approximately 5 acres of land are required every year in the Woking Urban District for refuse disposal work, and when it is considered that owing to the nature of the district the Ministry of Health are unlikely to permit the erection of a refuse destructor, some indication will be available of the task which faces the Council in the years ahead.

The work of refuse disposal continues to be operated at an extremely low cost, which compares very favourably indeed with refuse disposal charges in other parts of the country. This can be attributed largely to the continued use of the Fordson Muledozer and the costs of labour and machine operation on two sites amounted in 1957 to approximately £2,700, as compared with a comparable pre-war cost of £5,250.

The decision of the Council to purchase the Weatherill Shovel will be of great assistance in this work, and amongst other advantages will extend the life of the West Byfleet site by at least one year. Equipment of this nature involves heavy capital outlay but represents a very vital step in the maintenance of facilities for refuse disposal.

Conclusion

The tremendous problems of public cleansing in a district with a rapidly rising population provide a challenge which is ever present if an adequate degree of working success is to be obtained. The really vital problems are too well known to be reiterated here, except to say that they are national in character. Proof of this lies in the increasing tendency of local authorities to reduce the frequency of refuse collection to periods of 8, 9 and 10 days; all these authorities are only too well aware of the desirability of carrying out a weekly collection of refuse, but it is quite impossible to produce the necessary reserves of labour.

It will never be possible to satisfy all ratepayers in the matter of these services, and some of the complaints received, especially after Bank Holidays, are unreasonable in the extreme. It is not unusual to be told that cleansing workers should not enjoy the privilege of Bank Holidays and that the service is too vital to permit of breaks of this character. On the other hand, it has so far been found possible to retain the day of collection for more than 90 per cent of the urban district and this in itself is a reasonably satisfactory achievement. Nevertheless, this could not be done without a vast employment of overtime labour. Under present circumstances this overtime provides the incentive which retains the labour in the Department, and I am quite confident that if another dozen employees were to be found to-morrow a similar number of resignations would occur because the elimination of overtime pay would bring down the wage to a level at which the work would prove totally unattractive.

